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NOTES ON THE VITAL STATISTICS OF THE
PHILIPPINE CENSUS OF 1903.

BY

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NOTES ON THE VITAL STATISTICS OF THE PHILIPPINE CENSUS OF 1903.¹

BY

ISAAC W. BREWER, M. D.,
of Ft. Huachuca, Ariz.

The Philippine Archipelago in latitude extends from N. $4^{\circ} 40'$ to N. $31^{\circ} 10'$, and in longitude from E. $116^{\circ} 40'$ to E. $126^{\circ} 34'$. There are 3,114 known islands comprising a land area of 115,026 square miles.

The inhabitants are mostly Malays, Chinese, and Negretos and a mixture of the races. The Negretos, living in the more inaccessible parts of the mountains, are said to number 23,000.

According to the census innumeration there were on March 2, 1903, 7,635,426 people on the islands, 6,987,688 were classed as civilized or partly civilized. There were 8,135 Americans, 6,136 other whites and 41,035 Chinese.

The density of the population for the entire archipelago was 67 per square mile. The most densely populated province, Ilocos Sur, had 398 persons to each square mile; 65 percent of the Christian population (civilized natives) live on the seacoast.

The average birthrate computed from records for the years 1876 and 1885 to 1898 was 47.9 per thousand. The average deathrate for the same period was 39.7 per thousand, but omitting the cholera years 1879, 1889 and 1890 it was 31.7.

The following tables with slight modification are taken from volumes I and III of the census of the Philippine Islands, 1903.

The census was taken under the direction of General J. P. Sanger, U. S. A., Major Charles

¹ Abstracted for the American Society of Tropical Medicine; published under the auspices of the Society.

Lynch, Surgeon, U. S. A., being his medical adviser.

From a study of the following tables which accounts for 93.9 percent of the deaths in the Philippine Islands and for 65.4 percent of the deaths in the United States, it will be seen that in general the excess in deathrate in the Philippines occurs among the preventable diseases. For such diseases as pneumonia, measles, influenza, typhoid fever, and diseases of the kidneys, the Philippine deathrate is much lower than in the United States. This would seem to indicate that the deathrate in the Philippines will not be excessive when proper sanitary measures have been instituted and when the inhabitants reach such a stage of civilization that they will observe the ordinary rules of personal hygiene.

The mortality among children under five, is very high, being 462 for the brown, 356 for the yellow and 586 for white people. This mortality is largely preventable. Among the native people many children die of convulsions; probably most of them are cases of tetanus, the infection taking place through the cord.

DISTRIBUTION OF DEATHS IN THE PHILIPPINE ISLANDS AND THE UNITED STATES. BY PRINCIPAL CAUSES, EXPRESSED IN PERCENTAGE OF THE TOTAL NUMBER OF DEATHS.—1902.

Cause of death.	Philippine Islands.	United States.
Cholera	31.1	....
Malarial fever.....	26.8	1.4
Tuberculosis of the lungs....	6.6	10.7
Epilepsy	5.1	0.3
Dysentery	3.7	1.1
Convulsions	3.6	1.5
Smallpox	3.4	0.3
Diarrheal diseases.....	3.2	3.3
Beriberi	1.3	....
Diseases of the stomach....	1.2	1.3
Bronchitis	0.7	1.9
Accident	0.7	....

Pregnancy	0.7	0.6
Measles	0.6	1.2
Tetanus	0.6	0.2
Influenza	0.4	1.6
Typhoid fever.....	0.4	3.4
Diphtheria	0.3	1.6
Croup	0.3	1.2
Asthma	0.3	0.3
Simple meningitis.....	0.2	1.2
Congestion, hemorrhage, and softening of the brain.....	0.2	....
Congenital debility and mal- formations.....	0.2	....
Erysipelas	0.2	0.3
Tumors	0.2	0.3
Rheumatism	0.2	0.5
Anemia	0.2	0.2
Scarlet fever.....	0.1	0.6
Whoopingcough ...	0.1	0.9
Dengue	0.1	....
Other forms of tuberculosis..	0.1	....
Cancer	0.1	2.8
Organic diseases of heart....	0.1	6.7
Pneumonia	0.1	10.2
Nephritis and Bright's disease	0.1	3.5
Puerperal septicemia.....	0.1	0.3
Female diseases of the genital organs	0.1	0.3
Paralysis	0.1	2.3
Diseases of pharynx.....	0.1	....
Diseases of bones.....	0.1	0.1
Hemorrhage	0.1	....
Senile debility.....	0.1	2.8
Bubonic plague ¹.....	....	....
Leprosy ¹ .....	....	....
Suicide ¹ .....	....	0.5

¹ Represented.

Table I shows the percentages of deaths from the more important diseases by season for the year 1902:

The foregoing statistics confirm the general impression gained from three years' service in the Philippines, that the greatest deathrate occurred in the wet season. Variola is more

fatal during the dry season while there is little seasonal differences for malaria.

Table of deaths in 1902 arranged by months and seasons, with percentages of total number of deaths which occurred in each: are shown in Table II.

Table III shows the normal meteorologic conditions at Manila (latitude N. $14^{\circ} 35'$, longitude E. 121°) and the conditions that prevailed in 1902:

The following table of comparative death-rates of whites in the Philippine Islands and the registration area of the United States shows the relatively great mortality among children under five:

Age Group.	Philippine Islands.	United States.
Under 1 year.....	448	165
Under 5 years.....	138	52
5 to 14 years.....	22	4
15 to 24 years.....	20	6
25 to 34 years.....	21	9
35 to 44 years.....	27	12
45 to 64 years.....	47	22
65 and over.....	391	87

The deathrates are analyzed by color and those of the brown people by sex in Table IV.

Table V show each of the three most prominent races—brown, white and yellow—and for the eight principal diseases, the proportional number of victims of each disease to the total number of deaths of the race in 1902.

The following table shows the relation of disease to the seacoast:

Disease	Deathrate	
	Interior	Coast
Malarial fever.....	23.7	13.8
Cholera	21.4	18.9
Tuberculosis of the lungs....	5.7	3.4
Diarrheal diseases.....	5.7	3.6
Smallpox	2.2	2.1
Beriberi	0.6	0.9

TABLE III.

	Cold Season		Hot Season		Wet Season	
	Normal	1901-2	Normal	1902	Normal	1902
Mean temperature	77.7	75.4	82.2	82.8	80.6	80.4
Maximum temperature	95.9	91.4	100	97.0	95.8	93.9
Minimum temperature	60.3	60.3	63.3	72.1	68.9	71.8
Mean relative humidity	78.7	79.0	75.2	73.9	84.4	84.6
Precipitation.	78.87	13.23	15.70	14.86	50.89	46.42
Number of rainy days	28	42	31	40	77	81

TABLE IV.

Age Group	Brown			Yellow	White	
	Total	Male				Female
Under 1 year.....	321	348	293	—	448	
Under 5 years.....	141	151	131	356	138	
5 to 14 years.....	43	45	41	87	22	
15 to 24 years.....	33	33	33	18	20	
25 to 34 years.....	42	42	42	22	21	
35 to 44 years.....	49	50	48	29	27	
45 to 64 years.....	70	75	65	52	47	
65 and over.....	146	150	142	212	391	

TABLE V.

Disease.	Brown.	White.	Yellow.
Cholera	31.1	42.9	31.4
Malarial fever.	26.9	4.0	10.7
Tuberculosis of the lungs.	6.6	3.3	12.5
Dysentery	3.7	6.0	4.7
Diarrhea	3.1	3.3	2.8
Senile debility.	1.5	1.1	0.6
Beriberi	1.3	....	8.3
Diseases of the stomach.	1.2	1.6	0.9

TABLE VI.

	Total	Brown	Mixed	Yellow	White	Black	Total per 100,000
Insane	15,372	15,328	16	15	9	4	220
Blind	15,811	15,772	19	13	7	0	226
Deaf	23,227	23,176	16	20	12	3	332
Deaf and dumb	5,910	5,907	3	0	0	0	85

The table should not be interpreted to mean that the lowlands are more healthy than the higher ground. Very little of the higher ground in the Philippines is occupied by civilized population.

Cholera appeared in Manila in March, 1902, and spread rapidly over the islands, causing 31.1 percent of the deaths that year and 19 percent of the deaths in 1903. The total number of deaths from this disease recorded in the census reports was 200,348. During the epidemic of 1879 there were about 400,000 deaths from cholera and in 1889-1890 the mortality from the disease was about 260,000. At the date of the present writing (September 6, 1905) the daily press reports the reappearance of the disease in Manila.

Table VI shows the statistics relative to the defective classes among the civilized population:

Manila, the chief city of the archipelago, is situated on the west coast of the island of Luzon in latitude N. $14^{\circ} 35'$. It occupies the delta of the Pasig river and the soil is damp and badly polluted.

The population as given by the census was 219,928. The deathrates since 1900 were as follows: 1900, 44.5; 1901, 42.6; 1902, 69.2; 1903, 44.7.

The high rate for 1902 was caused by the epidemic of cholera that prevailed during that year.

The following shows the deathrate for Manila and several other tropical cities: Bombay, India, 1901, deathrate 76.7; Manila, P. I., 1903, deathrate 44.7; Alexandria, Egypt, 1901, deathrate 37.3; Calcutta, India, 1903, deathrate 37.0; Cairo, Egypt, 1901, deathrate 34.8; Havana, Cuba, 1901, deathrate 22.1.

In the following table are shown the deathrates

for the principal diseases for Manila and the rest
of the archipelago for 1902:

Disease	Deathrate	Deathrate
	for Manila	for Archipelago
Convulsions	16.7	2.3
Cholera	15.6	20.0
Tuberculosis of lungs	4.5	4.0
Bronchitis	3.8	0.4
Diarrhea	3.2	2.0
Dysentery	1.9	2.0
Meningitis	1.7	0.2
Malarial fever	1.5	17.0
Beriberi	3.8	1.0

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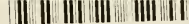
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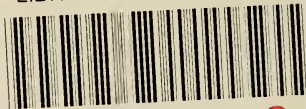
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